Effective: 3/1/98

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## 4 FOOD PACKAGE/DRAFT ISSUANCE

# 4.14 Infant Food Packages

**POLICY:** Food packages for infants shall be selected according to age and nutritional needs using the Food Package Tailoring/Selection Charts (attachment to Policy 4.10). Contract formulas are the routine formulas issued to formula-fed infants. Approved noncontract standard and special formulas may be issued according to policies. The routine food package progression includes cereal at 5 months and juice at 9 months, though these may be issued at other ages if nutritionally needed or as appropriate (though no earlier than 4 months of age).

#### **BACKGROUND:**

## Contract for Infant Formula

The Wisconsin WIC Program contracts with a single manufacturer of infant formula to be the primary provider of standard formulas to WIC infants. In FY 97, the contract, which provides for a rebate on each can of concentrate, powder and ready-to-feed contract formula purchased through authorized retail vendors, produced approximately \$17 million in additional food dollars for the WIC Program. WIC also provides non-contract standard and special formulas and medical foods (liquid nutrition products) in certain circumstances. See the Formulas and Medical Foods Table in the Attachments for a complete listing of contract and non-contract products provided by Wisconsin WIC.

### Milk-Based Formula

The routine milk-based contract formulas (regular and lactose-free) provided by WIC contain at least 10 mg iron per liter and 20 kilocalories per fluid ounce (as required by Federal WIC Regulations).

A true need for a lactose-free formula is rare because lactose intolerance in infancy is rare (lactose is the primary carbohydrate in breast milk). However, lactose-free formula is an acceptable product. Unlike soy, there are no contraindications for infants born with very low birth weights.

#### Soy-Based Formula

The typical protocol when milk-based formula is not tolerated - and without a specific diagnosis - is to try soy formula before a special formula. The American Academy of Pediatrics Committee on Nutrition published the following conclusions/recommendations on soy-based formulas in: Soy Protein-based Formulas: Recommendations for Use in Infant Feeding. *Pediatrics* 1998;101(1):148-153 (sent to Projects in the May 1998 WIC Nutrition Update):

- In term infants whose nutritional needs are not being met from breast milk or cow milk-based formulas, soy-based formulas are safe and effective alternatives.



- Soy-based formulas are appropriate for galactosemia and hereditary lactase deficiency.
- Parents seeking a vegetarian diet can be advised to use soy-based formula.
- Most previously well infants with acute gastroenteritis can be managed after rehydration with breast milk or cow milk-based formula. Soy-based formulas are indicated when lactose intolerance has been documented.
- Soy-based formula has no proven value in the prevention or management of colic.
- Soy-based formula has no proven value in the prevention of atopic disease (e.g., asthma, allergic rhinitis, eczema).
- Infants with documented cow milk protein-induced enteropathy or enterocolitis should not be given soy-based formula routinely. Instead, they should be given a formula with hydrolyzed protein or synthetic amino acid (e.g., Nutramigen).\*
- Most infants with documented IgE-mediated allergy to cow milk protein will do well on soy-based formula.
- Soy-based formulas are not recommended for preterm infants who weigh <1800 gm.

\*In Committee on Nutrition: Hypoallergenic Infant Formulas. *Pediatrics* 2000;106(02):346-349, AAP further states: "Infants at high risk for developing allergy, identified by a strong (biparental; parent, and sibling) family history of allergy may benefit from exclusive breastfeeding or a hypoallergenic formula or possibly a partial hydrolysate formula."

## Introduction of Cereal and Juice

In order to facilitate the introduction of solids and juices, DAISy includes an automatic progression in food package production that adds cereal at 5 months and juice at 9 months. Cereal is added at 5 months because most infants are developmentally ready and likely to consume the amount provided in the food packages. Juice is introduced at 9 months because at that age most infants should be able to drink the juice from a cup, not a bottle. The CPA, however, may change this progression if nutritionally indicated (though these may not be provided before 4 months of age). To facilitate the introduction of juice by cup, Wisconsin WIC provides regular juice - not infant juice bottles that easily accommodate nipples.

The most typically issued food packages are #410 for infants birth to 4 months, #421 for infants 5-8 months, and #490 for infants 9-12 months. These provide the maximum quantity of foods allowed (8 lbs. powdered formula, 8 lbs. powdered formula plus 24 ounces infant cereal, and 8 lbs. powdered formula plus 24 ounces infant cereal and 92 ounces juice, respectively).

### **PROCEDURE:**

### A. INFANT FORMULA



- Select a Regular Contract Formulas package. See the Food Package
   Tailoring/Selection Chart (Regular Contract Formulas section). Recommend the
   milk-based formula unless there is a need for soy or lactose-free. If the
   mother/caregiver is currently giving or is requesting a non-contract standard or
   special formula, see the appropriate issuance policy for issuance criteria and
   procedures:
  - a) Policy 4.15 Special Formulas for Infants
  - b) Policy 4.16 Non-Contract Standard Formulas
  - c) Policy 4.17 Low-Iron Formulas
  - d) Policy 4.19 Formulas and Medical Foods NOT Provided by WIC
- 2. Select the appropriate quantity of formula.
  - a) If the infant is exclusively breastfed, issue food package #888 (see also Policy 4.13 for the Breastfeeding Dyad).
  - b) If the infant is partially breastfed, provide only the amount of formula needed (see also Policy 4.13 Breastfeeding Dyad). The predesignated rebate food packages provide varying quantities of concentrate (31, 24, 16, and 8 cans) or powdered (1-9 cans) to facilitate the support of breastfeeding.
  - c) If the infant is totally formula fed, the maximum quantity of formula is usually issued, though less may be provided if indicated.
- 3. Select the appropriate form of formula, i.e., concentrate or powdered. This decision is based on participant preference or upon desired reconstituted quantity (powdered usually reconstitutes to a higher quantity than concentrated; see the attached Reconstituted Formula Amounts). If ready-to-feed is requested, see Policy 4.18 Ready-to-Feed Formulas.

### **B. CEREAL AND JUICE**

- 1. Determine when cereal or cereal and juice are to be issued. DAISy has a built-in "food package progression" for the introduction of cereal and juice, though the CPA may provide these earlier or later.
  - a) Determine when to introduce cereal.



- (1) Most infants are developmentally ready for cereal at 4-6 months of age. WIC routinely introduces it 5 months, based on anticipated consumption of 24 oz.
- (2) A package with cereal may be issued earlier (no earlier than 4 months of age) or later if nutritionally indicated. Document the rationale.
- (3) During the certification period, DAISy will automatically produce a food package with cereal depending upon the first package issued (e.g., if #402 was first issued, DAISy will produce a #406 at 5 months. If a #403 was first issued, DAISy will produce #407 at 5 months, etc.).
- b) Determine when to introduce juice.
  - (1) Most infants should be able to drink out of cup by 9 months of age, the age at WIC routinely issues juice.
  - (2) A package with cereal and juice may be issued earlier (no earlier than 4 months of age) or later if nutritionally indicated. Document the rationale.
  - (3) During the certification period, DAISy will automatically produce a food package with juice depending upon the previous packages issued (e.g., #406 progresses to #481 at 9 months of age).

#### C. TRANSITION TO CHILD PACKAGE

1. An infant may receive a child's package if the pick-up day is within 16 days of the first birthday and the first day to use is on or after their birthdate (see Policy 4.30 A.8).

#### NOTES:

Available resources:

- USDA: <u>Infant Nutrition and Feeding: A Reference Handbook for Nutrition and Health Counselors in the WIC and CSF Programs</u>, 1993 (distributed to local agencies by the Regional Office Nutrition Consultants in 1994).
- <u>Professional Resource on Infant and Adult Formulas</u>. Illinois Department of Public Health. July, 1996 (sent to Projects in the December 1996 WIC Nutrition Update)

#### ATTACHMENTS

- Wisconsin WIC Program Formulas and Medical Foods Table
- Reconstituted Formula Amounts